

ALASKA COUNCIL ON EMERGENCY MEDICAL SERVICES
MINUTES - Thursday, March 6, 2008

Call to Order:

David Hull, Vice-Chair called the spring meeting of the Alaska Council on Emergency Medical Services to order at 8:35 a.m.

Welcome and Introductions:

ACEMS Members in Attendance:

Ron Bowers

John Dickens

Donald G. Hudson, DO

David Hull, Vice-Chair

Soren Threadgill

Roy Sursa

State Section of Injury Prevention and EMS Staff in Attendance:

Tim Bundy, Chief of IPEMS

Mike Branum, Acting EMS Unit Manager

Tariq Ali, Trauma Registrar

John J. Papasodora Jr., Administrative Clerk

Judy O. Neary, Public Health Specialist

Shelley K. Owens, Public Health Specialist

Doreen Risley, Public Health Specialist

Brenda Knapp, Health Program Manager

EMS Regional Staff in Attendance:

Sue Hecks, Executive Director, Southern Region EMS Council, Inc.

Bobbi Leichty, Executive Director, Southeast Region EMS Council, Inc.

Dan Johnson, Executive Director, Interior Region EMS Council, Inc.

Lee Parham, YKHC Region

Aggie Jack, EMS Director, Maniilaq EMS

Dave Potashnick, EMS Regional Director, North Slope Borough Fire Department

Haven Harris, Acting EMS Director, Norton Sound Health Corporation

Mike Motti, EMS Coordinator, South East Regional Health Corporation EMS

Terry Stone, EMS Coordinator, Kodiak Area Native Association

Skip Richards, EMS Coordinator, Chugachmiut Corporation

Liaison Representative Members in Attendance:

Frank Sacco, MD, Alaska Native Medical Center and American College of Surgeons; BJ Coopes, MD, Children's Hospital at Providence

The Minutes from the October 4-5, 2007 meeting and the agenda for March 6-7, 2008 were approved.

REPORTS FROM COMMITTEES, LIAISON MEMBERS AND STAFF

Executive Committee Report (Dave Hull)

Thank you letters were written to Del Smith and Matt Leveque for their help in communications with the ALMR group. Dr. Ken Brown has resigned from ACEMS. Dave sat in for Dr. O'Neill on Primary Care Council.

EMS Training Committee Report (Mike Branum)

The Committee has been reviewing practical exam components to ensure consistency and uniformity and is updating skill sheets. There has been communication with the Alaska Nurses Association to create an alliance with EMS for training purposes. With regards to the regulations project, Mike has decided to seek repeal of the entire chapter and re-adopt it, and to circulate the revisions in April or May. The Training Committee meets three times a year for three days at a time. Kathy McLeron and Dave Rockney were elected as Chair and Vice

Chair. Dave Hull commented on the importance of preparing meeting minutes. Discussion followed about the fiscal impact of Training Committee decision on the Regions and the value of timely minutes.

EMS Program Report (Mike Branum)

Mike introduced Tariq Ali, the new Trauma Registry Coordinator. Interviews for a Training Coordinator are under way. Shelley is currently working on the EMS data system with ImageTrend out of Minnesota. The system should be up and running by the end of the year. With regard to ALMR, there was some conflict among the frequencies on the Kenai Peninsula. The transmit frequencies are in the band that is allocated for ALMR. To allow for expansion they have to reprogram the radios on the Peninsula and change the frequencies on those repeaters. There is money in the ALMR budget to deconflict the system. Four repeaters will have to be replaced. The Willow Mountain repeater has been fixed repeatedly and will be replaced as the cost to repair it has gotten too great. The biggest obstacle is the lack of information on the user fees. On July 1st the state needs to pick up fifty percent of the ALMR system. Dave noted the AML's representative on ALMR is the perfect person for that position, and has an immense knowledge of the process and the implications to EMS and fire as far as the communication goes.

Health Planning/Systems Development Report (Pat Carr/Alice Rarig)

Health Planning and Systems Development prepared a Healthcare Data Book that covers demographics, health status, health facilities, etc. This past year the priorities included workforce development, having a representative on the Healthcare Planning Council, advocating for state funding, and addressing inadequate prenatal care. They have an agreement with hospitals to provide data on hospital discharges and have received 2001-2006 data from all hospitals except one in Fairbanks and the small Tribal hospitals. The Dept. of Transportation collects information about crash sites and conditions, and she is applying for \$100,000. to try and collect the information into one system.

Mark Millard (Primary Care Office)

Mark reported on activities of the Primary Care Office, including the preparation of a the Health Care Data Book, which is a statistical description of demographics, health care needs and resources available to address health care needs

Regional Directors and Coordinators Report (Sue Hecks)

The RD&C has decided to return to 2-day meetings. They heard reports from Mike Branum, including a training update and discussion of training issues. Shelley reported on the pre-hospital data project. The guest speaker for Symposium Opening Session is going to be Nadine Levick to talk about responder safety. IPEMS was able to purchase fit test kits in bulk for regional distribution. RD&C discussed legislation affecting EMS and spent time addressing radio communications. The grant application is due April 1. They are encouraging anyone who has communication needs to apply for the grant. They talked about the state paging system and ETS is now able to work with the Regional Directors on communications requests. They went through the Phase 8 Code Blue requests and are looking for new funders. Doreen, Dan, and Bobbi did a very effective presentation to potential funders. They are working very hard toward future funding of the program and for new sources of funding to help keep it going.

There are issues with the use of certifying officers in other regions. David Hull would like to see consistency in how COs are used throughout the state. One issue is to have regional sites for practical testing. The Regions are going to evaluate the issue of Regional sites for practicals and they are developing a CO manual in Southern Region. There was discussion of the course approval process and how to improve it, including ways to reduce certifying officer demand and increase availability. Mike Branum will work with IT so that online course application information is passed to the Regional offices. Three years ago the Regions obtained an incremental increase from the legislature. Costs are increasing and the Regions are facing grave issues with the current level of funding. They will try and obtain a twenty percent increase to all the Regions, and are requesting support from ACEMS. They also want to focus on how to increase the general budget for IPEMS. They've had staffing challenges but no increase in their budget. This will be discussed at a later time.

ACS/ANHS Liaison Report (Frank Sacco, MD)

They've been working in Juneau on the trauma legislation. Rep. Coghill has agreed to draft legislation to limit liability for designated trauma centers which may include a fund for uncompensated trauma care. ACS will be evaluating the state trauma system and making recommendations from legislation to organization to funding. October/November is the projected date. A couple of other hospitals have requested trauma center applications. Ketchikan will be reviewed as a level 3 and Seward hospital is interested in a level 4 designation. Realistically they're about 15-16 years into the mission and haven't had a concerted statewide effort. Training opportunities have improved. There may be a course in Dutch Harbor which is ideal for some of the smaller facilities. The Indian Health Service has decided to make trauma a priority. The Trauma System Review Committee will be meeting and taking a more active role in review of some cases.

ALMR Update (Del Smith, Operations Mgr, ALMR)

The state is working on the Skagway site and where to locate one in Ketchikan. They're trying to deconflict a number of state radio frequencies so they can fully implement ALMR at some of the sites. Radio frequencies in the conventional band the state has can't be used. There are up to 3% busy signals in certain locations and they want to minimize the number. They want sites turned on fully and the conflicts dealt with, and then see where they can add capacity or if there are sites that need to be put into long term planning. DOD is going to add a few more channels in the Wasilla/Palmer area. They've been developing the policies and procedures and getting them to the Users Council. There have been discussions about cost share and a cost share white paper was written which examined other state systems. The position of the white paper is that entities like EMS and small local agencies should not pay to be in the system. They haven't been charged to be in the infrastructure up to this point. The plan is that the state of AK and the DOD would split the cost for one more year to June 30, 2009. If there was a cost share to any entities beyond DOD and AK, they would be able to put it in their budget or decline membership. AML is now an associate member after they signed the cooperative agreement. Jeff Tucker is AML's representative on the board. The Municipality of Anchorage is also an associate member. Their zone controller would be a backup to ALMR's zone controller. The DOD, non-DOD organizations and the state are the rest of the organizations on the board. The legislature is ultimately the organization that provides money to DOA and they are the lead on the State's side in respect to ALMR. They don't think there's going to be a hard answer on the funding question before this legislative session is over. Each of the organizations will propose a position on member fees.

Public Information and Education Committee Report (Dave Hull)

PIE talked about a number of reasons that squad members and leaders are leaving, including economic reasons. The staffing crisis is getting worse. The legislation for CPR as a requirement for graduation isn't progressing. Alaska is ranked as number five in the nation for volunteer services. We're using up EMT IIIs up faster than we can replace them. Aggie commented that in the smaller communities EMT IIs and IIIs are leaving after training to go to larger communities. In Anchorage, the numbers of EMT IIs and IIIs are falling a bit, but EMT I numbers are increasing. They're promoting an ETT class in school to increase numbers of younger people coming into the EMS field.

MOST Initiative & Discussion (Merritt Andruss, RNP)

The MOST committee has been working with a couple of doctors from Providence Hospital. The goal is a set of physician's orders that will go with the patient being transferred. The form has treatment options and is a way of putting together advanced directives with a physician's order for treatment. It has worked well in a number of states. This has been in progress for quite a while but is moving along and they may be rolling it out in a hospital initially. Every year the questions they get with Comfort One are more and more complex, but this form answers a lot of questions that providers have. Some have discussed replacing Comfort One, but that has not moved forward so revising the regulations might be the best move. This would be one of the DNRs that prehospital providers could recognize. One of the comments was that it doesn't contain a signature place for the patient or the patient's legal advocate. Comfort One is an informed consent document as well as a physician's order. This was designed originally as an inter-facility transport document and for doctors, nurses and care providers to use as a checklist, though prehospital will be involved.

Legislative Update & Discussion (Brenda Knapp)

Brenda gave a report on the bills and those that have had some action taken on them by the legislature.

Persons to be Heard

The KTOO radio interview of Bobbie was rather successful. It was approximately ten minutes long.

Mike, speaking for himself: there's a problem in rural Alaska with the declining numbers of volunteers and services. He doesn't think it's appropriate to just watch it and he thinks someone needs to do something about it. It's a statewide problem and he'd like to see ACEMS do something. The issue needs a lot of discussion and investigation and perhaps a subcommittee or something of that nature could help.

Don: they should train people in high school. ACEMS they could suggest this be included in the curriculum in the high schools as part of a premedical education. Mike Branum: Juneau Capital City Fire is looking at a similar program, including drafting regulations to eliminate the 18 year old age restriction to become an EMT. Dave: there is a concern about maturity to make decisions. Ron: supports reduction in age so school-age ETTs can become EMTs without waiting 2 years. It is becoming increasingly difficult to get ETT programs into schools. Other options: Boys & Girls Clubs; Campfire; after school programs; online training in the smaller communities might be a possible solution as well. Sue: She is truly a believer of Grow our Own. In small communities when it's difficult to find work and survive, and when the youth tend to move to more populated areas to utilize those skills, we lose them in Rural Alaska. One of the things they might focus on is incentives they can work on to keep people in Rural Alaska. Mike: there is support for the project but the problem is it ties up an ETT instructor five days a week for forty five minutes depending on the school schedule. Don: he started with six kids that started as ETTs who have gone all the way through to medical school. You have to nurture these people and mentor them. He feels this is more valuable than a retirement incentive. Sue: one of the ACEMS priorities is support and maintenance of existing systems and retention and recruitment was a big issue even a couple years ago. Bobbie: someone needs to see how much it would cost if we had to replace these volunteers and pay for them. If EMTs stick with it long enough there is employment for them outside of medical school, such as working as a medical assistant in the clinic. If we emphasized this at an EMT class it might help with recruitment and retention. Roy: there is a federal website with wages starting with \$19 an hour just to show up. Sue: the management class that was developed in SE identified mentoring as part of the retention process. Ron: lengthening the ETT certification from two to three years might be discussed. Aggie: ETT is equivalent to DOT first responder. Renewal for first responder is three years. Mike: there is no problem with the first responder renewal limit being three years.

Dave suggested forming an Ad hoc Committee to study this problem.

Recessed: 4:50 pm

ALASKA COUNCIL ON EMERGENCY MEDICAL SERVICES
MINUTES - Friday, March 7, 2008

Call to Order:

Call to Order 8:30 am

OLD BUSINESS

Discontinuation of MAST Program (Dan Johnson, IREMSC)

The army in Fairbanks has a Blackhawk based medevac unit called Charlie Company. For the past thirty years they've provided services to civilians in remote areas. They no longer provide domestic army medevac services and Alaska is the last remaining MAST program in the country. In the Interior they typically average between 40-70 missions a year of which 30-50 are civilian responses. They're pulling out of the Interior on July 1st. The commanding General of the Army in Alaska has told Governor Palin that they won't be providing EMS, and that the entire company will be leaving the state. In addition, the army nationwide has a policy of contracting for medevac services. The state is different from other states in climate, remoteness and geography. There is no capability for a helicopter-based medevac service in Interior Alaska. Their solution will be either to contract for services, get the National Guard involved, or come up with a different deployment strategy which will allow them to maintain some medevac capability. The Company has 12 helicopters and crew, and when they deploy to Iraq, all of them will go. If they deploy to Afghanistan, it will be only a partial deployment. They're working toward a solution with the Legislature, local governments, EMS squads, private companies, etc. The Fairbanks Borough has a special interest in this and is working with the army to figure out what the army's plan is for contracting. Once they know that, the private companies will know whether or not it's even feasible.

Legislators are working with the state and through the governor and General Cambell. A possible solution is that the army may fund additional activity for the National Guard in Interior Alaska. The bottom line is that 40-50 times a year there's a civilian in the Interior that needs help only a helicopter can provide. If there's going to be an expanded civilian mission, that funding has to come from the state. Ron: isn't sure that a civilian contractor might not be able to meet the needs that the state may need. Mike: one of the main problems with a civilian service is that they have to fly under FAA regulations which limit their capabilities. Soren: agreed with the lack of probable capabilities of a civilian contractor. John: near Bethel the army guard's resources are extremely thin at the moment. Dan has been contacted by a member of the air guard and he said that they would cover Interior Region from Anchorage. From what he hears and feels, it's not something they're going to have a lot of resources to devote to this.

REGIONAL EMS DIRECTORS & COORDINATORS REPORTS

Interior EMS Region Report (Dan Johnson)

Symposium is April 3rd and 4th with pre-symposium on the 1st and 2nd and the annual IREMSC membership meeting. They continue to do the training for the Fairbanks North Star Borough, and have for the last four years, most classes being conducted in their own facility. They've hired a part time instructor to concentrate on the local classes. They've been in the new building for a year and a half now. Their on site training has increased. They received a Rasmuson grant for building maintenance. They replaced the garage doors and rebuilt the entire roof and their fuel use has gone down by thirty percent. Code Blue is very successful in the Region, and they are on Phase 8. Their previous phases are almost completed. This has impacted nearly every community in their Region and has increased funding by about two million dollars. The transition to ALMR was pretty rough, but once Dave Hull and Del Smith got involved it made a huge difference. There are still some rough spots, but Dan does not hear any complaints at this time. They did have a couple of very large capital problems, as most of the communities transitioning to ALMR have national funds. Tok was at the forefront of the change, but had no homeland security funds. They had a situation where the troopers were making the transition and potentially they could not communicate with the troopers without the Moto Bridge. They were in a crisis because they didn't have the money to buy the radios they needed, and the Denali Commission gave them a grant which allowed them to get them up to speed on their radios. Compared to two or three years ago, the problems are fairly manageable now.

They were able to craft a new personnel policy with two other regions, and they split the attorney's fees. The University of Alaska convened a task force to look at simulation technology to train people in EMS. The task force was organized to look at what the state of the art is in simulation technology and what we should do in Alaska. They had a meeting Wednesday morning, and there is a lot of very sophisticated technology for training EMS. The most intriguing was a mobile simulation lab in four to seven containers with a total weight of four hundred pounds. He could possibly talk with his colleagues and come up with a pilot project and some funding for a mobile simulation lab. Some of the equipment at the present is too advanced for distance delivery.

Norton Sound Report (Haven Harris, Acting Medical Director)

Norton Sound is recruiting for a medical director of Norton Sound Health Corporation and working with other agencies to work to fill in some staffing gaps. He's trying to get the Phase 5 funding spent. They didn't receive Phase 6 funding. They've received a number of vehicles, and are going to develop space to shelter them from the elements. They sent a track vehicle to Gambell with Phase 7 funding. Phase 8 has a lot of requests for vehicles which creates another storage problem. A lot of the vehicles that were sent out early need repairs or replacement as there are some pretty rough environments in Norton Sound. There are estimated to be 450 to 500 runs this year from Nome to Anchorage.

Southeast Region Report (Bobbi Leichty)

The EMS management course is about ready to undertake its third module on recruitment and retention. Mike and Angela are working with UAS to develop the ETT online course. Chapter one is substantially complete and passed on to the university for its technical support. They hope to have it ready by the Training Committee meeting in April. They are also developing an EMT I book and have contracted with Bill Mackreth and Angela to co-author it. Completion is estimated to take fourteen months. They are going to try and keep the cost at less than thirty-five dollars. There is also talk of a developing an instructor guide for the EMT book. Southeast Region has spent almost all of its Code Blue money and expects delivery of vehicles soon. Tenakee Springs requested and received a rescue boat. The theme of the Southeast Symposium in Wrangell will be CSI. Topics include emergency medical dispatch, evidence collection, and a mock criminal trial. On Friday night, they will be serving slabs of ribs at a free dinner before Mike Motti debuts his brand new EMS game show. Ketchikan has had a bad year with plane crashes, a tourist killed on the dock, four kids in a house fire and a fighter jet crash. The youth responder team in Sitka has been in existence for 3-1/2 years. The last six months were spent putting on an ETT course in the Sitka high school. The second step is to recruit the ETT course graduates for their remaining period of time in high school. After graduation it is hoped they will go on to medical careers in one form or another. The program is essentially self supporting. Adult leaders and the 4H service are providing insurance and background checks. They got a state DOT grant for a program in Craig and Klawock, Craig high school finished its first ETT class in mid-January.

Southern Region Report (Sue Hecks)

It's been a very challenging year due to new and transitioning staff members. They will likely start advertising outside of the state to fill staffing gaps. Southern Region is a very large and diverse region and spans 196,000 miles. There are over a hundred EMS responder services in the Region, including medevac services and 12 hospitals. They also serve areas outside of the Region for certification. They have a list of instructors willing to travel on their website as well as Code Blue forms. They are doing a major website update in the summer. The State has an administrative checklist which is being updated for Southern Region to help with the management side of EMS. They are doing an equipment inventory project to look at their needs over the next five years because they rent out a lot of equipment as well as their normal use. At Symposium, AMST has been doing the skill contest but the skills competition is being completely revised. Kathy McLeron attended the Medical Board meeting in January in Anchorage. It was a very positive thing to have her there. Kathy is working to get the MOI class ready. It is difficult for people to get the practical exam that is required to get into the MOI class. One of the things they are looking at doing is putting on quarterly practical exams. The American Heart Association training center is going gangbusters and they have over a hundred trainers. They purchased new software specifically for managing training centers which helps track inventory and instructors. Code Blue continues to take a large part of their time. It has been very successful but has been very demanding on staff time. They hosted the new funders meeting January 29th and are looking for new funders for Code Blue.

Communications takes up a lot of Sue's time. They've been meeting with the State EMS office and Kenai Peninsula and Copper River to fix communication issues. She was invited to participate in the state communications interoperability plan in November. Eastern Aleutian Tribes has chosen to withdraw from the Southern Region Subarea grant program but will maintain active representation on the SREMSC Board of Directors. The Kenai Peninsula has agreed to spend a day in strategic planning for the first time in 20 years. Cold Bay has a new first responder service and is working on moving up to ALS. Hope Sunrise went from an ALS service to first responder. There are a lot of services struggling with volunteer numbers.

North Slope Borough Report (Dave Potashnick)

This past year there were 1,200 ambulance calls in Barrow, another thousand calls among the other villages and about 640 medevacs. Some good news was that they recently started an Explorer program. The first few meetings in Barrow they had 25 kids and about 4 parents show up for the meetings. One of the village fire chiefs had 21 kids show up. They do a number of transports that are low acuity. One of the things that has kept the village system up and running is the fact that they do pay fire chiefs in each village as well as an assistant for each chief. The Borough has made a significant investment in maintenance and manning of equipment. Since the budget submission, they were told there would be a quarter of a million dollar cut to their budget. They have gone through the bid process for their oxygen systems, and they are on the third iteration of the bid process. During the previous quarter they had 19 education offerings with about 127 students. Volunteer-wise they seem to be doing well in Barrow, but the villages are more problematic. One of the solutions was to use the Explorer program to bring younger people into the EMS community earlier. Before they can bill Medicaid, the Assembly needs to act on it and form a fee structure. The oil industry is rather self sufficient as far as EMS goes and so there is very little impact on North Slope services.

Northwest Artic - Maniilaq Association Report (Aggie Jack)

Their CEO's contract was severed in January of this year and they are advertising for a new CEO. Their lab may also be in trouble, as a manager has quit just recently. They are down to one dentist, a doctor is leaving, and the only functioning program is theirs. There were close to 1,000 ambulance calls for 2007. They took over medevacs in 2003 and it's stabilized now, and they are billing with 911. Training was on the back burner for a little bit. They are going to start ETT classes in the high school again, hopefully. It was successful ten years ago, so should be again. Code Blue: They are on Phase 8 and have purchased everything. The holdup is insurance for Search and Rescue groups for four wheelers and snow machines. They haven't received any USDA funds for a couple years. They put together a 1-5 year plan that is currently being looked at. There are 500 or so new employees and 50 programs. She has a page and a half of reporting requirements in her job description. The instructors' schedules are such that she hardly sees them, which is a possible reason why training is down a little bit. There's a nursing shortage as well. Recruitment and retention: A lot of the older EMTs are retiring and being replaced by ETTs. Their retention is pretty good and they have first responders starting in a lot of their villages along with search and rescue groups. She expects approximately 50% of the people leaving for higher education in EMS fields will return to their communities. They had a nursing program which didn't produce much and the nursing instructor in their Region has left.

Yukon Kuskokwim Health Corporation (Lee Parham)

They have a lot of training going on. They had 7 EMT refresher classes and 7 ETT courses. Eventually a lot of the villages want to get their 'dragon slayer' group together. They are teaching at least one BLS course per month plus numerous other classes. They also have EMT II and III courses going on. They are having a problem getting certified instructors out there. The fire department had 717 EMS runs. They are working to complete Code Blue Phases 5 and 7. The clinics are trying to cut down on expense for filling oxygen tanks and are asking for O2 concentrators. They've spent a lot of the money for the Phase 6 items, and have sent out the AEDs. In injury prevention, they taught classes to 1500+ students. 112 bicycle helmets were sold or distributed. Their project for 2008 is the development of the multiagency suicide prevention program.

Alaska Trauma Registry Report (Tariq Ali)

He has the 2005 trauma registry data completed, but the 2006 data needs to be cleaned up. There have been significant increases in vehicle accidents involving ATVs and snow machines. Assault, suicide, etc, has not

changed. Poisonings have increased in the 15-24 age range. Accidental firearms cases have increased. Assaults have increased between ages 1-4. Suicides increased in ages 15-64. It is the number one cause of death other than motor vehicles. Drowning remains a top death in all age groups. Motor vehicle accidents have decreased from 1996-2005. The highest incidents of poisoning were in 1999. Poisoning rates include alcohol poisoning. The top five injuries from 1996-2005 are poisoning, motor vehicle accidents, suicide, falls, and assault.

REPORTS FROM COMMITTEES, LIAISON MEMBERS AND STAFF

Pediatric Liaison Report (BJ Coopes, MD)

They are developing a curriculum for an educational program set up before any disasters hit, starting with PEP and adding on to it as needed. They are experimenting with a one-hour pediatric assessment course. They need education about what happens 48 hours and 7 days after disasters for children. They suspect abuse and loss might be large issues in treating children in disaster areas. Nobody has ever thought or dared to think about how they are going to triage kids in disasters. They need a new index to take children's biology into account. They are fighting for things like condoms and other types of equipment to keep communicable diseases down. Security is a major problem that they didn't appreciate before. Another issue is communications. The grant is mainly aimed at hospitals. What they found in most disasters is that you need 3 communication systems so that if one or two fail you still have another alternative. The public awareness committee identified some remedial points, such as access to schools, having written protocols and MOAs. They have had their tabletop RSV outbreak that went very well. On May 10th they are going to have a wildfire scenario.

EMS for Children (Doreen Risley)

The advisory group met last month and worked on the pediatric facility recognition program. They made a few changes in the program and now have three levels: stabilization, treatment, and pediatric critical care. There is an 8-hour CME required of the physicians and the nurses. Teams would primarily be from Anchorage and the nurses working in these facilities. We have to survey the hospitals to see if they have written transfer agreements and protocols for patient transfer. Most hospitals do not have written transfer agreements. There are studies that show that children who are witnesses to violence in the home could suffer from other disorders such as asthma. Doreen and Linda Chamberlain would be focusing on developing a curriculum and protocols, as well as a survey to see what people know about intimate partner violence. The training would also meet the requirement for EMTs to be trained in domestic violence. Once again, EMSC did not receive national funding.

Code Blue Project (Doreen Risley)

We've again requested 425K in capital funding and we won't know until May or so if we will receive it.

State EMS Symposium Planning (Doreen Risley)

The keynote speaker will be Dr. Nadine Levick. She has done a lot of research on safety in the back of ambulances. It is still in the early phases of planning. They are going to try and do the immunizations again and are thinking of having the Alaska Health Fair come in and offer some blood tests.

Trauma System (Doreen Risley)

The trauma care systems program is not yet funded. We did get 30K from the Rural Flex grant so that is being used to support travel for the trauma system review committee and an ETT course in May. We are getting more support for Training. It's going to cost 70K for ACS to do a review of our trauma system.

Rural AED Program (Doreen Risley)

They gave us 105K for the Rural AED Program. We were able to get some AEDs out and a little money to the Regions for training. The Public Health Centers by and large do not have AEDs, so purchasing them for the centers may be conducive.

AK Heart Disease & Stroke Prevention Report (Soren Threadgill)

Soren gave a report on the website and the features within. They conducted a major survey last year and how Alaska is dealing with stroke statewide. AK Regional Hospital is the only stroke certified hospital in Alaska.

Injury Prevention Report (Deb Hull-Jilly)

Deb reported on injury prevention activities, including the Alaska Family Violence Prevention Program. They are applying for a grant to assess the amount of domestic violence that children are exposed to and to develop a curriculum that can be modeled and used nationwide. They are looking at a reduction of traumatic brain injury through the helmet program. A PSA was developed out of the Commissioner's office and is very upbeat. Two other organizations that have approached them, and if we run the PSA again, they are willing to put funds toward it. The focus of the CPS program is having children restrained properly in vehicles. Gordon Glaser will be doing training in the Juneau area very soon. Mary Krom is the head of the fire related injury prevention program. They will be submitting their renewal for funding through CDC at the end of April. Mary is retiring and moving down to Washington. They will be trying to get her position advertised during the last two weeks of her employment. They want to resurrect the injury in the bag program. They have the occupational injury surveillance program which is being funded through the Alaska field office for NIOSH. The Poison Control lead is Maria Bailey and they are hoping to upgrade her position to a Program Coordinator. The drowning database is a new project supported by NIOSH. The first report will be in the next 2 or 3 months.

IPEMS Section Report (Tim Bundy)

The budget for IPEMS is 6 million plus. The part of the budget for the four Regions has remained the same and there's a move to replace Pro-Share with general fund dollars for the multiple program groups. He would expect that the same amount of funding as they had previously. We're in about the same position as last year, with the exception that we have a good shot at a new grant Linda Chamberlain is working on. We're also going to get another non-competitive grant continuation for the AEDs and EMS-C grants should continue. We may or may not get the same amount of money for our preparedness group. The Poison Control program will increase by 50k to 120k. One thing that needs to be noted is that this year, in addition to Code Blue which is 425k a year, we've asked for some additional moneys in Senate Bill 221. We've asked for 265k dollars for this year, and then 190k additionally for the next four years to maintain communications and fix repeaters. The Willow repeater has gone down at least three times this year. We've also had problems with a number of the repeaters in the Kenai system that are in conflict with ALMR. What has been proposed is for people to switch paging systems. There are meetings every week on that and they are hoping to come up with a resolution not only for Kenai but other areas. There is also a conflict issue in Fairbanks. The 190K would go toward replacing repeaters and trying to fix repeaters that are upgradeable, and 75K would be set aside for the statewide assessment study. We have not yet put in for any moneys with the state for the \$7.2 million that is dealing with assessment. When we go to narrow banding, the other repeaters up there will allow us to have a backup as well as be upgraded from narrow banding. What we don't have is a good assessment of our capabilities on non-road systems. We're also not sure what's ALMR and what's not. The contract for the data system has been signed. Tim gave a detailed account of the new EMS data system's features.

ACTION ITEMS

MOTION: Letter of support on behalf of Primary Care Council (Don/John)

ACTION: Passed

MOTION: Request Training Committee to provide an agenda and minutes. (Roy/Ron)

ACTION: Passed

MOTION: Letter to Senate for funding increase for AK Community Health Centers (Ron/John)

ACTION: Passed

MOTION: Letter of support for funding for the Code Blue project. (Don/Soren)

ACTION: Passed

MOTION: Letter of support for increase in grants to Regions. (Don/Soren)
ACTION: Passed

MOTION: Support for Increase in funding to IPEMS for 2010 (Ron/Soren)
ACTION: Passed

MOTION: Support for Trauma Legislation
ACTION: Passed

MOTION: Letter requesting the State DOA pay the user fees for ALMR after June 30th 2009 without transferring costs to users. (Ron/Don)
ACTION: Passed

MOTION: Letter to the Governor supporting the MAST program (Don, Roy)
ACTION: Passed

MOTION: Letter of support for national funding for EMS-C to Congressional delegation (Don, Ron)
ACTION: Passed

MOTION: To reaffirm the EMS Priorities adopted in 2003 (Soren/Roy)
ACTION: PASSED

- Maintain current programs and services
- Revitalize current EMS services through the retention, recruitment and training of volunteers
- Continue to increase the availability of essential emergency medical equipment in Alaska

Membership Status

MOTION: to reappoint the sitting members [Don/Roy]
ACTION: Passed

Election of Officers

The following Officers were elected: Chair: Dave Hull; Vice-Chair: Roy Sursa; and Officer-at-Large: John Dickens.

Appointments to Committees

Bylaws Committee:

MOTION: Reappoint Ron Bowers & appoint Soren Threadgill
ACTION: Passed

Training Committee

MOTION: Appoint Tom Vaden (John/Ron)
ACTION: Passed

MOTION: Appoint Lee Parham (Don/John)
ACTION: Passed

Dates for next meeting:

The meeting will be held in Anchorage at Southern Region EMS Council. ACEMS: October 9-10, 2008; Regional Directors & Coordinators and Committee meetings: October 6-8, 2008

Adjourned: 4:07 pm